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PTO/SB/21 (09-04)

Approved for use through 07/31/2006. OMB 0651-0031

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# TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Application Number	10/605,883
Filing Date	November 4, 2003
First Named Inventor	David J. HOUSTON, et al.
Art Unit	3711
Examiner Name	Not Yet Assigned
Attorney Docket Number	28647.00003
Total Number of Pages in This Submission	2

## ENCLOSURES (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input checked="" type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
<div>Remarks</div>		

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Dickinson Wright PLLC		
Signature			
Printed name	John M. Naber		
Date	August 29, 2006	Reg. No.	46,487

## CERTIFICATE OF TRANSMISSION/MAILING

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PTO/SB/82 (09-04)

Approved for use through 11/30/2005. OMB 0651-0035

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CHANGE OF CORRESPONDENCE ADDRESS**

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First Named Inventor	David J. HOUSTON, et al.
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Examiner Name	Not Yet Assigned
Attorney Docket Number	28647.00003

**I hereby revoke all previous powers of attorney given in the above-identified application.**

☐ A Power of Attorney is submitted herewith.

**OR**

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I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

**SIGNATURE of Applicant or Assignee of Record**

Signature

*Peter D. Houston*

Name

Peter D. Houston

Date

8-24-06

Telephone

517-332-0485

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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